

## **Application Data Sheet**

### **Application Information**

<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	Utility
<b>Suggested classification::</b>	
<b>Suggested Group Art Unit::</b>	Unassigned
<b>CD-ROM or CD-R?::</b>	None
<b>Computer Readable Form (CRF)?::</b>	No
<b>Title::</b>	METHOD AND FRAMEWORK FOR TRANSACTION SYNCHRONIZATION
<b>Attorney Docket Number::</b>	038927-0203
<b>Request for Early Publication?::</b>	No
<b>Request for Non-Publication?::</b>	No
<b>Suggested Drawing Figure::</b>	5
<b>Total Drawing Sheets::</b>	7
<b>Small Entity?::</b>	Yes
<b>Petition included?::</b>	No
<b>Secrecy Order in Parent Appl.?::</b>	No

### **Applicant Information**

<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship Country::</b>	US
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	Jeffrey
<b>Family Name::</b>	Capone
<b>City of Residence::</b>	Scottsdale

**State or Province of** Arizona  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 4111 N. Drinkwater Blvd., #309  
**City of mailing address::** Scottsdale  
**State or Province of mailing address::** AZ  
**Postal or Zip Code of mailing address::** 85251

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** India  
**Status::** Full Capacity  
**Given Name::** Pramod  
**Family Name::** Immaneni  
**City of Residence::** Temple  
**State or Province of Residence::** Arizona  
**Country of Residence::** US  
**Street of mailing address::** 1115 E. Lemon Street, #125  
**City of mailing address::** Temple  
**State or Province of mailing address::** AZ  
**Postal or Zip Code of mailing address::** 85281

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** INDIA  
**Status::** Full Capacity  
**Given Name::** Sudhakaran Venkata  
**Family Name::** Mudiam

**City of Residence::** Chandler  
**State or Province of** Arizona  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 1145 E Locust Dr.  
**City of mailing address::** Chandler  
**State or Province of mailing** AZ  
**address::**  
**Postal or Zip Code of mailing** 85249  
**address::**

#### **Correspondence Information**

**Correspondence Customer Number::** 23392  
**E-Mail address::** PTOMailLosAngeles@FoleyLaw.com

#### **Representative Information**

<b>Representative Customer</b>	23392	
<b>Number::</b>		

#### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent</b>	<b>Parent Filing</b>
		<b>Application::</b>	<b>Date::</b>

#### **Foreign Priority Information**

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

### **Assignee Information**

**Assignee name::** Aligo Inc.